

Faxed to 703-872-9306 on 11/21/2003

PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

| | | | |
|---|----------------------|------------------------|-----------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 09/843,597 | |
| | Filing Date | 04/26/2001 | |
| | First Named Inventor | Mossberg | |
| | Art Unit | 2872 | |
| | Examiner Name | Craig H. Curtis | |
| Total Number of Pages in This Submission | 4 | Attorney Docket Number | LTSM01CP1 |

ENCLOSURES (Check all that apply)

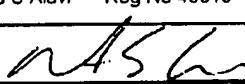
| | | |
|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Remarks | <input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
|---|--|--|

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|---|
| Firm or Individual name | David S Alavi Reg No 40310 |
| Signature |  |
| Date | 11/21/2003 |

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Faxed to 703-872-9306 on 11/21/2003

| | |
|-----------------------|---|
| Typed or printed name | David S Alavi Reg No 40310 |
| Signature |  |
| Date | 11/21/2003 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

COPY

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

From: David S Alavi 800-853-6150 To: Examiner Curtis - 2872

Date: 3/3/2004 Time: 12:40:36 PM

Page 1 of 6

FACSIMILE COVER PAGE

To : Examiner Curtis - 2872
Sent : 3/3/2004 at 12:40:32 PM
Subject 09/843,597

From : David S Alavi
Pages : 6 (including Cover)

Examiner Curtis:

Attached is a copy of our election submitted 11/21/2003. Included is the fax receipt acknowledging that the submission was received by the PTO. I did not include a copy of the originally submitted Form PTO-2038 Credit Card Payment Form. By the way, my credit card was charged for the petition fee.

I am pleased that the file has been found, and I appreciate your efforts to locate it. Please let me know if you require anything else from me to get this application rolling again.

David Alavi
Reg No 40310
541-686-9462 voice
800-853-6150 fax
dalavi@northwestpatent.com

USPTO 11/21/2003 3:19 PM PAGE 1/001 Fax Server
 TO: Auto-reply fax to 800-853-6150 COMPANY:

Auto-Reply Facsimile Transmission



TO: Fax Sender at 800-853-6150

Fax Information

Date Received:

Total Pages:

11/21/2003 3:16:53 PM [Eastern Standard Time]

4 (including cover page)

ADVISORY: This is an automatically generated return receipt confirmation of the facsimile transmission received by the Office. Please check to make sure that the number of pages listed as received in Total Pages above matches what was intended to be sent. Applicants are advised to retain this receipt in the unlikely event that proof of this facsimile transmission is necessary. Applicants are also advised to use the certificate of facsimile transmission procedures set forth in 37 CFR 1.8(a) and (b), 37 CFR 1.6(f). Trademark Applicants, also see the Trademark Manual of Examining Procedure (TMEP) section 306 et seq.

Received
Cover
Page

=====>

From: David S Alavi 800-853-6150 To: Examiner Craig Curtis Date: 11/21/2003 Time: 12:15:48 PM Page 1 of 4

Faxed to 703-872-9306 on 11/21/2003

Approved for use 07/01/01 69-303073 CMB (651-002)

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

| | | | | | | |
|---|--|---|--|--|--|---|
| TRANSMITTAL FORM | | | | | | |
| Do not use for correspondence after initial filing | | | | | | |
| Total Number of Pages in This Submission | 1 | | | | | |
| <table border="1"> <tr> <td colspan="2">ENCLOSURES (Check all that apply)</td> </tr> <tr> <td> <input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Pet. Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.63 </td> <td> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Motion <input type="checkbox"/> Motion to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Representative <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Remarks </td> <td> <input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply D/A) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (Please Identify Below) </td> </tr> </table> | | ENCLOSURES (Check all that apply) | | <input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Pet. Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.63 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Motion <input type="checkbox"/> Motion to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Representative <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Remarks | <input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply D/A) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (Please Identify Below) |
| ENCLOSURES (Check all that apply) | | | | | | |
| <input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Pet. Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.63 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Motion <input type="checkbox"/> Motion to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Representative <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Remarks | <input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply D/A) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (Please Identify Below) | | | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | | | | |
| Firm | David S Alavi | | | | | |
| Individual name | Reg No 40310 | | | | | |
| Signature | | | | | | |
| Date | 11/21/2003 | | | | | |
| CERTIFICATE OF TRANSMISSION/MAILING | | | | | | |
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Faxed to 703-872-9306 on 11/21/2003 | | | | | | |
| Typed or printed name | David S Alavi Reg No 40310 | | | | | |
| Signature | | | | | | |
| Date | 11/21/2003 | | | | | |
| <small>This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by law public which is to be given by the USPTO to applicants. Confidentiality is governed by 35 U.S.C. 223 and 37 CFR 1.16. This collection is estimated to take 12 minutes to complete. Including the time for review of the instructions, collection of information, and transmission to the USPTO, the burden is estimated to be 12 minutes per response. The amount of time may vary due to the complexity of the information being sent. Send comments regarding this burden estimate or any other aspect of the collection of information (including suggestions for reducing burden) to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. ADDRESS FEES TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</small> | | | | | | |
| <small>If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.</small> | | | | | | |

PAGE 1/4 "RCVD AT 11/21/2003 11:53 PM (Eastern Standard Time)" * SVR:USPTO-EFXRF-1/24 * DNIS:2732311 * CSID:800-853-6150 * DURATION (mm:ss):02:30